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Bib Data Sheet

CONFIRMATION NO. 9894

<b>SERIAL NUMBER</b> 09/702,691	<b>FILING DATE</b> 11/01/2000 <b>RULE</b>	<b>CLASS</b> 455	<b>GROUP ART UNIT</b> 2681	<b>ATTORNEY DOCKET NO.</b> 679P01US	
<b>APPLICANTS</b> Seste Dell' Aera, Aylmer, CANADA; <i>AAH</i> <b>** CONTINUING DATA *****</b> <i>AAH</i> <b>** FOREIGN APPLICATIONS *****</b> <i>AAH</i> CANADA 2,288,495 11/02/1999					
<b>IF REQUIRED, FOREIGN FILING LICENSE</b> <b>GRANTED ** 01/06/2001</b>					
Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance <i>AAH</i> Verified and Acknowledged Examiner's Signature Initials		<b>STATE OR COUNTRY</b> CANADA	<b>SHEETS DRAWING</b> 5	<b>TOTAL CLAIMS</b> 16	<b>INDEPENDENT CLAIMS</b> 3
<b>ADDRESS</b> <div style="text-align: center;">AIR MAIL</div> Shapiro Cohen Station D P. O. Box 3440 Ottawa ,ON K1P 6P1 CANADA					
<b>TITLE</b> Radio calibration by correcting the crystal frequency					
<b>FILING FEE RECEIVED</b> 840	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		